STATE OF SOUTH CAROLINA )	
(Continue of Cont.)	BEFORE THE
(Caption of Case)  Example: Application for a Class C Charter Certificate from )	PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
John Doc dba Doe's Limo	
)	TRANSPORTATION COVER SHEET
Application For Class C }	DOCKET
Non Emergency?	NUMBER: 2015 - 173 - T
How are general	
) )	If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.
(Please type or print) Submitted by: Candice Phodriquez	Telephone: (803) 465-3117
Address: 124 Old Stone Rd	Fax:
Columbia SC 29229	Other:
	Email: rhodriguezc10 40 hoo.com
NOTE: The cover sheet and information contained herein neither replace as required by law. This form is required for use by the Public Service C be filled out completely.	es nor supplements the filing and service of pleadings or other papers
NATURE OF ACTION	(Check all that apply)
Application - Class A/A Restricted	Request for Name Change on Certificate
Application - Class C Taxi	Request to Amend Scope of Authority
Application - Class C Charter	Request to Amend Tariff (rate increase, etc.)
Application - Class C Charter Bus	Request to Amend Passenger Limit
Application - Class C Non-Emergency	Request R
Application - Class C Stretcher Van	Request  Exhibit  Late-Filed Exhibit  Letter
Application - Class E Household Goods	Late-Filed Exhibit
Application - Class E Hazardous Waste	Letter
Application	Proposed Order
Request for Extension to Comply with Order	Publisher's Affidavit
Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded	Reservation Letter
Request for Cancellation of Certificate	Response Return to Petition
Request for Suspension	Other:
Request for Reinstatement	Outri.
> a	

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

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## PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 Executive Center Drive, Suite 100 Columbia, South Carolina 29210

Phone: (803) 896-5100

Fax: (803) 896-5199

# APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

CLASS C - NON-EMERGENCY Date:	
Application is hereby made for a Certificate of Public Convenience and Necess of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.	sity, in accordance with the provision
1. Quality TransportationalLC.  Name under which business is to be conducted (corporation, partnership, or sole property)  124 Old Stone Rd. Columbia, SC 29229  Street Address of Applicant	
Mailing Address of Applicant (if different from stre	eet address)
Phodrigueze 1 @ yahoo. com Email Address	Fax
<ol> <li>If the Applicant is an LLC or a corporation, a copy of the Certificate of Exist Secretary of State and the Articles of Incorporation must be attached. (If incorporation Secretary of State "Foreign Corporation" Certificate.)</li> </ol>	
<ul> <li>3. Select Entity Type: (Check one)</li> <li>☐ Individual Owner/Sole Proprietorship</li> <li>☐ Partnership - List names and address of all person having an interest in</li> <li>☐ Corporation - List names and addresses of two principal officers.</li> </ul>	n the business.
Candice Phodriguez 124 Old Stone R	d Columbia 30 29229
l of 8	

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Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

## **Financial Statement**

Applicant's assets and liabilities are as follows:

Assets:		<u>Liabilities</u>	<u>•</u>
Value of Real Estate		Mortgage/Loan on Real Estate	*
Value of Motor Vehicles		Loans Owed on Motor Vehicles	5600
Cash on Hand	\$1,000	Business/Other Loans Owed	
Cash in Bank	52,000	Other Liabilities or Debts	and the second second
Value of Other Assets and Equipment		Total Liabilities	5/200
Total Assets	73, 100		

### INSTRUCTIONS:

- 1. "Value of Real Estate" means the actual or estimated market value of any real property/buildings owned by the Company/Business Applying for a Certificate.
- 2. "Mortgage/Loan on Real Estate" means the outstanding balance on any Mortgage, Equity Line or other Loan secured by the Real Estate listed in Item 1.
- 3. "Value of Motor Vehicles" means the actual or fair estimated value of any moving vans, trucks or other vehicles owned by the Company/Business Applying for a Certificate.
- 4. "Loans Owed on Motor Vehicles" means the outstanding balance on any loans or liens on the vehicles listed in Item 3.
- 5. "Cash on Hand" is the total of actual cash held by the Company/Business applying for a Certificate on the day this form is filled out.
- 6. "<u>Business/Other Loans Owed</u>" means the outstanding balance on any small business loan or other unsecured loan made by a person, bank or business to the Business/Company applying for a Certificate.
- 7. "Cash in Bank" means the current balance in checking accounts, savings accounts or the like in the name of the Company/Business applying for a Certificate. Do not include retirement accounts or personal bank account balances.
- 8. "Value of Other Assets and Equipment" should include the actual or estimated value of items such as office equipment (computers/furnishings), moving equipment (hand trucks/blankets/strapping), and trailers.
- "Other Liabilities or Debts" means specific amounts/balances which the Company/Business applying for a Certificate
  knows that it owes to other persons or companies; for example Franchise Fees. This does NOT include regular bills
  such as electricity bills, security system costs, insurance, salaries, etc.

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## PROPOSED RATES AND CHARGES FOR SERVICE

Proposed Rates and Charges:

50/ Trip + \$2."/Mile Over 10mi Wait \$100/hr after 15min.

Requested Scope of Authority: Check all counties in which you are requesting permission to operate. You will only be allowed to operate in those counties checked below. You may request "Statewide" authority if you intend to operate in all counties in South Carolina.

Abbeville	Cherokee	Florence	Lee	Saluda
Aiken	Chester	Georgetown	Lexington	Spartanburg
Allendale	Chesterfield	Greenville	Marion	Sumter
Anderson	Clarendon	Greenwood	Marlboro	Union
Bamberg	Colleton	Hampton	McCormick	Williamsburg
Barnwell	Darlington	Horry	Newberry	York
Beaufort	Dillon	Jasper	Oconce	
Berkeley	Dorchester	Kershaw	Orangeburg	Statewide
Calhoun	Edgefield	T Lancaster	Pickens	/

Laurens

3 of 8

Richland

Charleston

Fairfield

WHEEL-

## DESCRIPTION OF EQUIPMENT

You are not required to own a vehicle to file an application. However, prior to being issued a certificate by ORS, you will be required to have obtained a vehicle.

Maximum Number of Passengers Vehicle is Equipped to Carry: (The number of passengers a vehicle is equipped to carry is based on the number of seatbelts in the vehicle, including the driver's seatbelt.)

1-7 Passengers, including driver

8-15 Passengers, including driver

MAKE	YEAR & MODEL	VIN#	EMPTY WEIGHT	CHAIR LIFT
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		W		
			(S)	
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NEW BUSINESS QUOTE
Date Quoted: 10/27/2020
JJAMS Submission Number: 1472348
Quote # 2311016 Version # 1 Revision # 1
Insured: QUALITY TRANSPORTATION



Agency: 805411

SOUTH CAROLINA FINANCIAL SOLUTIONS, ILC DBA AFFORDABLE INSURANCE SOLUTIONS

JASON HUMPHRIES

jhumphries@scfsolutions.org

Applicant Information: QUALITY TRANSPORTATION 124 OLD STONE RD

COLUMBIA, SC 29229

Underwriter:

JENNIFER RIDGILL Direct Phone: (843) 577-1405

Direct Phone: (843) 577-140 jennifer.ridgill@jjins.com Minimum Earned Premium: 25% NO FLAT CANCELLATIONS Term Length: 12 Months Commission: 10.00%

CARRIER AND PREMIUM DISTRIBUTION

CARRIER(S)

line of Business

CARRIER

410 - COLUMBIA INSURANCE COMPANY (ADMITTED) (AN ADMITTED A++ CARRIER)

Public Auto

PREMIUM WITHOUT TERRORISM

Public Auto

\$12,971.00

Total Base Premium

\$12,971.00

Total Amount Dre

\$12,971.00

\*Please refer to the attached quote letter for additional Terrorism charges and terms.

THE TERMS AND CONDITIONS OF THIS QUOTATION MAY NOT APPLY WITH THE SPECIFICATIONS SUBMITTED FOR CONSIDERATION. PLEASE READ THIS QUOTE CAREFULLY AND COMPARE IT AGAINST YOUR SPECIFICATIONS.

To bind coverage, please contact the Commercial Transportation Department at 1-800-487-7565 extension 5015. You do not have binding authority on this account and must speak with an underwriter to bind. A BINDER CONFIRMATION WILL BE SENT TO YOU ONCE YOUR REQUEST IS PROCESSED.

BINDING INSTRUCTIONS	UNDERWRITER NOTES
full premium or JJPF Down Payment and signed finance contract are due at the time of binding.	This quote is based upon the following Items. Any changes in these items may change the terms and conditions of this quote.
If bound we will need the following within 10 days:	<b>8</b> 3
Completed and signed supplemental application     South Carolina Uninsured/Underinsured Selection/Rejection Form	Please review the Terms and Conditions per the attached company quote.  Subject to no losses  Priver has at least 2 years of experience driving like units, clear MVR, and valid SC license  Rated with a state filing. We must cover all owned and operated units.

This is not an insurance policy nor an insurance binder. This quote is an indication of insurance premium based on the information provided. This quote is based upon the insurer's agreement to quote and is issued by the undersigned without any ilability whatsoever on the insurer. This quote may be withdrawn by the insurer at any time prior to binding.

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# ACCEPTED FOR PROCESSING - 2020 October 29 5:38 PM - SCPSC - 2020-262-T - Page 7

## Account Summary For Quality Transportation

Quote #: 9914995 Status: Pending Policy Type:

Originsily Quoted: 9/20/2019 3 49 PM Quote Printed: 9/20/2019 3:18 PM EDT Proposed Effective: 10/26/2021 12:00 AM 10/26/2021 12:00 AM

Quoted By: Jennifer Ridgill Johnson & Johnson, Inc. 200 Wingo Way, Ste 200 Mt. Pleasant, SC 29464 Phone - (800) 487-7565 Fax - (643) 577-1511 jennifer.ridgill@jjins.com

DOT #: Unknown MC#: Unknown

Symbol	Coverage	Limit (\$)	Premium (\$)
7	Liability	1,000,000 CSL	11,466
7	UM - BIPD	100,000 CSL	308
7	UIM - BIPD	100,000 CSL	308
7	Medical Payments	1,000	117
7	Physical Damage Total Ins Value	See Specific Unit 10,000	772

Total \$12,971.00

Revision: 71SC2020R01

Vehicle Information

NICO-Rate Version: 8.6.38322.1209

Unit

2013 DODGE GRAND **CARAVAN (28177)** \$10,000 Comp/Coll Radius: Up to 50 Miles

**UIM Med Pay** Liability UM

11,466 308 308 117

Deductible: 1,000/1,000

Phys Dam Cargo/ Al/Lessor

Unit In-Tow Sub Total N/A N/A

12,971

National Indemnity Company Since 1940 ---

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# ACCEPTED FOR PROCESSING - 2020 October 29 5:38 PM - SCPSC - 2020-262-T - Page 8 of 12

## **Driver Information for Quality Transportation**

NICO-Rate for South Carolina Columbia Insurance Company

Quote:#: 9914995

Revision: 71SC2020R01

Driver	Date of Birth	License Class	Years Exp.	Total Points	Points Factor	Age Driver Mid- Factor Factor term Unit
	***************************************		0.00 0.000	0.1000.00.000.000.00.00		the state of the s
1 Candace Rhodriquez	2/7/1979		0	0	1,0000	0.9000 0.9000

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## Exhibit Fit, Willing, and Able (FWA)

	Name
1	Is there currently any outstanding judgments against the Applicant?  Yes  No  If Yes, list judgements here:
2.	<ul> <li>Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire motor carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?</li> <li>Yes</li> <li>No</li> </ul>
3	Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?  (2) Yes  (3) No

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## **Exhibit on Driver Qualifications**

1.	CPR (	Certificate or its equiv	alent,	s must possess at least a current American Red Cross Standard First Aid and and records that verify/record such training must be kept on file at the siness within South Carolina.
	Ø	Yes	0	No
2.	Appli	cant understands that	driver	es must be in compliance with all OSHA regulations.
	Ø	Yes	0	No
3.	1 1			rs must be trained in the use of all vehicle installed safety equipment such as extinguishers, and other equipment as outlined in PSC Regulations.
	Ø	Yes	0	No
4.		cant understands that lisabilities, including		rs must be able to physically perform actions necessary to assist persons lchair users.
	Ø	Yes	0	No
5.				rs must wear a professional uniform and photo identification badge that the company for whom the driver works.
	Ø	Yes	0	No
6.	of saf		verify	rs must complete twelve (12) hours of in-service training annually in the area /record such training must be kept on file at the company's primary place of
	Ø	Yes	0	No

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## PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 EXECUTIVE CENTER DRIVE, SUITE 100 COLUMBIA, SOUTH CAROLINA 29210

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (S.C. Code Ann. Regs., 1976), and R.38-400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 2, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

S.C. Code Ann. Section 58-3-250 states, in part, that every final order of the Commission must be served by electronic service, registered or certified mail, upon the parties to the proceeding or their attorneys.

Please c	heck	the	appl	icabl	e	box:
----------	------	-----	------	-------	---	------

	The Applicant AGREES to receive future Commission orders related to the Applicant's authority in South Carolina
	through the Commission's eService System. The Applicant authorizes the Commission to serve its orders by using the e-
<u> </u>	mail address as it appears on page one of this Application. To sign up for eService notifications, please visit www.psc.sc
	gov to create a My DMS account.

The Applicant DOES NOT AGREE to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System.

The Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

Duner

STATE OF SOUTH CAROLINA

COUNTY OF Lexington

SWORN TO BEFORE ME

nis <u>27</u> day of <u>// C759 0</u>, 20 <u>/</u>

Notary Public

Commission Expires 507 26 2029

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Print Application

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# The State of South Carolina



## Office of Secretary of State Mark Hammond

## **Certificate of Existence**

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

QUALITY TRANSPORTATION LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on April 14th, 2015, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 15th day of April, 2015.

Mark Hammond, Secretary of State

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